Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			/3					RATE	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TC	TAL CHARGE	ABLE CLAIMS	/ 3 minus 20=		. 0			X\$ 9=		OR	X\$18=	
INE	DEPENDENT C	LAIMS	/ minus 3 =		* 0			X40=	<u> </u>	OR	X80=	
ΜL	ILTIPLE DEPEN	NDENT CLAIM P	RESENT					.105		1		
* If the difference in column 1 is less than zero, enter						column 2		+135= TOTAL	<u> </u>	OR	+270=	
CLAIMS AS AMENDED - PART II								TOTAL	L	OR	TOTAL OTHER	710
_	197	(Column 1)		(Colur	nn 2)	(Column 3) SMALL			ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIC PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MI	Minus	***	CLAIM	=		X40=		OR	X80=	
	1111011111202	INTAHON OF MIC	DETIFEE DEF	·	CLANVI			+135=		OR	+270=	
							L	TOTAL	-	,	TOTAL	
		(Column 1)		(Colur	nn 2)	(Column 3)	. *	ADDIT. FEE			ADDIT. FEE	
AMENDMENT B	5,004	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	- CI A114	=		X40=		OR	X80=	
	FIRST PRESE	NTATION OF MU	JETIPLE DEF	ENDENT	CLAIM		╵┟	+135=		OR	+270=	
							L	TOTAL DDIT. FEE			TOTAL	
(Column 1) (Column 2) (Column 3)								IDDII. FEE B		•	ADDIT. FEE	·
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIC PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MI	Minus	***	CLAINA	=		X40=		OR	X80=	
<u></u>	TINOT FRESE	INTATION OF MI	JETTE DE	CINDEINI	CLAIM			+135=		OR	+270=	
*	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."										TOTAL	·
•••	If the "Highest Nu	mber Previously Pa nber Previously Pai	aid For" IN THI	S SPACE is	s less tha	n 3, enter "3,"	^	DDIT. FEE	ropriate box	,	ADDIT. FEE I umn 1.	<u> </u>